

**City of Morganton**  
**Application for Council Vacancy**

Name \_\_\_\_\_

Address \_\_\_\_\_

Phone Number (Home) \_\_\_\_\_ (Work) \_\_\_\_\_

(cell) \_\_\_\_\_ (email) \_\_\_\_\_

Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Are you a registered voter living in District 4? \_\_\_\_\_

How long have you been a Morganton resident? \_\_\_\_\_ Have you been convicted of a felony? \_\_\_\_\_

Have you ever run for an elective office? \_\_\_\_\_ If so, where and for what office?

\_\_\_\_\_

Do you have any close relative who is employed by the City of Morganton? \_\_\_\_\_

Why do you want to serve as a Councilperson? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

What qualifications do you have that would make you an asset to Morganton as a member of the City

Council? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

What issues would you like to see the Council address? \_\_\_\_\_

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**Prior Public Service**

Board/Commission/Civic

From

To

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Comments

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Date \_\_\_\_\_

Signature \_\_\_\_\_

**This application and all the information contained in it shall be a public record.**

Please fill out the form completely and return it to Kelly Russell at City Hall. If you have any questions call 828-438-5228.